



## ***Where We Live Pilot Project 2014 Report***

Since our last report in June 2013, significant progress has been made around the primary prevention of child sexual abuse in Washington State. WCSAP is excited to provide an update on the work happening at the coalition and at the local community sexual assault programs who are leading the way in our efforts to engage parents, caregivers, and communities in protecting children and changing social norms that contribute to child sexual abuse.

WCSAP's 2012 survey of sexual assault service providers indicated that most programs in our state had a specific interest in addressing child sexual abuse and are seeing this as a significant issue in their communities. However, programs were also struggling to differentiate between child sexual abuse awareness and primary prevention. They shared that funding, curricula, and training were the most important factors in moving their prevention efforts forward.

In response to ongoing feedback from the field and the gap in primary prevention approaches to child sexual abuse, WCSAP identified [\*Where We Live\*](#) as a promising curriculum and developed a pilot project to support its implementation in Washington during State Fiscal Year 14. This initiative was the first of its kind in our state and part of WCSAP's continuing efforts to be a leader in the comprehensive response to child sexual abuse. The statewide response to this initiative has been overwhelmingly positive, indicating strong buy-in and significant community need. We know that many programs have utilized *Where We Live* over the last year, several of whom did so independently from the pilot project.

### **Overview of Pilot Site Project**

Sites were selected for the pilot project through a competitive application process. Each applicant was evaluated on their community's readiness for a primary prevention initiative, their agency's prioritization of child sexual abuse, their internal capacity to provide the program, and their proposed plan for building community buy-in and recruiting program participants. There was also an additional emphasis on rural communities given Washington's demographics.

WCSAP was pleased to receive a total of 11 applications, of which 4 were selected for the project: The Lower Elwha Family Advocacy Program (Port Angeles), SAGE (Wenatchee), Pend Oreille Crime Victim Services (Newport), and the YWCA Clark County Sexual Assault Program (Vancouver). Three of the four sites are located in rural Washington counties, representing multiple regions of the state and diverse communities. From August 2013 to June 2014, these sites cumulatively implemented the curriculum (in four, 2-hour sessions) nine times. A total of 35 community members completed the training and 22 others participated in some of the sessions.

### **What does it take to implement this program?**

Each site's implementation of the curriculum and project was unique due to the community needs and available resources. However, we have calculated the averages of several program components from all of the sites to give a picture of the average program investment and activities.

- Facilitators = 2 staff
- Staff time for 1 implementation = 35 hours per facilitator
  - This includes building community partners, recruiting participants, preparing for the sessions, and delivering the curriculum
- Implementations during FY14 = 2
- Incentive budget = \$320
  - These budgets ranged from approximately \$180 to \$460
- Participants per implementation = 6



WCSAP provided comprehensive assistance to the project sites to support their implementation of the curriculum. This included funding for advertising and training materials, additional resources for program participants and their children, and incentives to reduce barriers to attendance. Additionally, WCSAP staff coordinated train-the-trainer workshops with the curriculum developers from Pittsburgh Action Against Rape (PAAR) and provided one-on-one phone and in-person consultation on the curriculum content and facilitation. Two conference calls were also held throughout the project to facilitate peer sharing among sites and provide guidance on curriculum content and implementation logistics.

To further reduce the financial burden of implementation, WCSAP staff created an alternative homework activity for participants that did not require the purchase of DVDs. This activity complemented the goals of the curriculum by reinforcing children's values and rights and creating an additional opportunity to build parent-child communication. Additional resources related to child sexual abuse, healthy sexuality, and children's sexual behaviors were also identified and provided to facilitators for distribution to program participants.

One of the primary goals of this project was to assess the effectiveness of the curriculum across our state and the value of broadening its utilization. To this end, WCSAP contracted with Dr. Stephanie Townsend to analyze the pre- and post-test surveys completed by program participants and provide a statewide evaluation of the project. Facilitators were also asked to complete questionnaires at the completion of each implementation and participate in an exit interview in an effort to gather qualitative data about implementation logistics, facilitation strategies, successes and challenges, and community impact. The information gathered through these processes is the basis for the majority of this report.

### **Community Partnerships and Recruitment**

The *Where We Live* curriculum strongly emphasizes the need for community partnerships and stakeholder input to make the program successful. In fact, the curriculum derives its name from stakeholder findings that participants want to engage in preventing child sexual abuse in a comfortable, familiar, and easily accessible environment – where they live. While this is not a radical concept, the focus on stakeholder input does help to set this curriculum apart from others.



The Washington programs piloting the curriculum were tasked with upholding this philosophy and invested time at the beginning of the project to make connections with social service agencies and other community partners that had relationships with parents and caregivers. Community partners included:

- Head Start
- Early Head Start
- Temporary Assistance for Needy Families (TANF)
- Indian Child Welfare
- Department of Social Human Services
- Educational Opportunities for Children and Families
- Daycare centers
- Faith-based centers
- County coalitions for children and families
- Children's residential and group care facilities
- Domestic violence shelter programs
- Alcohol and drug treatment programs or housing
- YWCA community programs
- Elementary and preschool programs
- Counseling programs
- Transitional housing programs
- Health and dental clinics
- Community centers or other gathering places

We know that it is challenging to engage parents and caregivers in prevention programs and that this has often been a deterrent for this type of programming. Participants have limited time and resources and prevention programs have to compete with other community events and services. Programs utilized a variety of community networking, advertising, and incentive strategies to help community partners and potential participants get on-board with the project.

Programs reached out to and collaborated with many community partners, held informational sessions, and made flyers. Great examples of creative strategies that were utilized include colorful and laminated business cards with child sexual abuse bystander tips and program information and display board with text and pictures to help tell a story about the program and activities.

## Participant Incentives

Since many barriers to initial and ongoing attendance can be addressed by offering incentives, funding to support these was an integral aspect of the pilot project. While the majority of these incentives were purchased, some programs were able to also find ways to get these resources donated. Programs provided the following incentives:

- Childcare
  - This can be a costly service to provide but allowed for a larger pool of participants to attend. Creative strategies for reducing these costs include timing the parent program to run simultaneously as a children's educational program and partnering with a program that already has childcare built into their structure.
- Transportation
  - If public transit is a reliable and highly utilized service, coordinating the times of the sessions with bus schedules and offering bus passes are great ideas.
  - If public transit is not utilized or feasible, providing gas cards can make a big difference in attendance. Programs typically offered participants between \$10- \$15 for this type of incentive.
- Snacks, lunch, or dinner during the sessions
  - Originally we anticipated snacks would be sufficient. However, most sites found that providing full meals was critical, especially since classes were often held during the dinner hour. In some communities there was additional significance in preparing home-cooked meals rather than catering.
- Gift cards
  - Most programs offered participants gift cards to places such as Safeway or Starbucks. Programs typically offered participants between \$10- \$15 for this type of incentive.
  - These cards were used as door prizes at each session, broken into smaller amounts and given as a reward for completing the take-home assignments, or reserved until the end for those that attended all of the sessions.
- Appreciation
  - In addition to the above higher-cost incentives, some programs found ways to express appreciation to participants that helped with group retention and satisfaction. This included certificates of completion, crafts to commemorate the group, and candy and small toys.

## Implementing the Curriculum

Almost all of the programs involved with this pilot project had two staff facilitators deliver the curriculum. Each session is two hours long and very interactive, so having a co-facilitator was helpful in balancing the needs of the participants and the time constraints. Additionally, staff believed having co-facilitators was very important in generating ideas throughout the process, from community networking to tweaking curriculum activities.

Program staff reported that the project required between 25 – 40 hours for each facilitator to build community relationships, engage with stakeholders, practice the curriculum, prepare materials, and deliver the curriculum. Most of the staff shared that they believe the time commitment decreased, or anticipate it would, as facilitators deliver more implementations of the curriculum and establish long standing community partners.

### What makes this curriculum unique?

- Shifts the focus to preventing perpetration; not victims protecting themselves
- Responsibility is on adults and communities to protect children
- Engages key community stakeholders
- Participants build and practice skills; deeper than just information sharing
- Effective program design
  - Adheres to *The Nine Principles of Effective Prevention*
  - Multi-session (4 sessions plus 4 take home opportunities)
  - Varied learning styles (discussion, small groups, videos, personal writing and reflection, role plays)
- Addresses CSA on the individual, relationship, and community levels of the Social Ecological Model

## Successes & Challenges with the Curriculum

While the curriculum manual prepares facilitators with background information and guidance on delivering the sessions, we believe facilitators will still need to invest time in learning the material, getting comfortable with the activities, and making the deeper connections between the session content, primary prevention, and CSA dynamics. Programs in the pilot project met and had conversations with WCSAP staff and other sites to discuss these aspects of implementation.

Facilitators shared that there were often challenges in delivering Session One due to the nature and amount of content and the time the evaluation tool requires of participants. Conversations about boundaries were engaging and robust, which sometimes made it challenging to complete all of the planned activities and discussions. Some suggestions for future implementations included inviting participants to come early for snacks and fill out the pre-survey or reading the pre-survey questions aloud to help people make their answer sections more quickly and keep on schedule.

Overwhelmingly, the sections of the curriculum that focus on healthy sexuality were the most challenging to facilitate. There are many factors that contributed to this challenge, including:

- Discomfort in discussing sexuality and sex
  - Values or beliefs that impact discussion of these topics
  - Especially true in regards to masturbation
- Participants' lack of knowledge about sexual development and sex education
- Uncertainty on how to engage in these conversations at home Some of the content may not be currently relevant to all participants depending on the age of their children

## Adapting for the Community

Just as with any curriculum, the content and activities may be a better fit for some communities than others. Many of the programs using the curriculum made some modifications to meet the interests or needs of participants and the time constraints of the sessions. This may be especially true for those working with a culturally-specific community.



One of the programs shared that they adjusted the role plays to fit their community by inserting community-specific details into the scenarios. By including family members' names, local stores, schools, sport events, and landmarks in the activities, it kept participants engaged with the program and made the scenarios more realistic.

### **Tips for Success**

The programs learned very quickly which strategies were useful and adjusted along the way. They have shared some tips for success for planning, engaging participants, and delivering the curriculum.

### Recruitment Lessons Learned

- Collaborate with many community partners, especially those who have long-standing relationships with parents and caregivers in your community. Their endorsement of the program will increase buy-in from potential participants.
- Try several advertising formats to appeal to a wide audience.
  - It is okay to have strategies not work--revise and try again!
- It is challenging getting people to commit to and return for each session. Try different retention strategies such as:
  - Ask participants to sign an agreement ahead of time to create buy-in and commitment
  - Send a confirmation letter after participants have signed up
  - Send emails in between sessions to keep them thinking about the next session and their take-home assignment
- Since this program is targeted towards parents and caregivers of young children, providing dinners and childcare is essential. This helps reduce reasons why adults cannot participate, and it also conveys that you respect their time and multiple commitments.
- If you are not sure what would make the program appealing to parents and caregivers, build in time early on to conduct focus groups or community polls to get an idea of what will make this a success.
- Recruitment strategies and incentives are not "one size fits all". Find out exactly what your community needs and wants.



### Participant Lessons Learned

- Be honest about the goals and content of the program from the beginning.
- Give participants ownership over some aspects of the sessions to create buy-in.
  - Let participants decide what the lunch or dinner of the next session should be. Not only do these decisions respect the interests of the group, but it also helps to create accountability to attend the next session.
- Consider the likelihood that adult survivors of sexual abuse may be in the group. The curriculum does not prepare facilitators to adjust and respond to the experiences of survivors – the content can be scary for parent/caregiver survivors if it is not framed.
  - During the Red/Green Light activity, it may be easy for participants to see everything as dangerous or over-identify with their own experience.
- The curriculum asks parents and caregivers to discuss and model healthy boundaries and healthy sexuality – but what if the participants have not had this information before? Time may need to be spent on teaching these concepts to the participants for themselves before they can model these with children.
- Let participants know you appreciate their time and energy in the group.
  - A low cost, yet highly effective, incentive is a certificate of completion.
- Consider providing simultaneous programming for participants' children during your sessions. Not only does this address the need for childcare, but it also strengthens the impact of programming when children and parents are getting consistent information and messaging.

### Curriculum/Facilitation Lessons Learned

- Practice, practice, practice! Even though the curriculum comes with a lot of guidance, these are challenging topics to teach and discuss.
- Get very comfortable with the role-plays. Don't just think or talk about them, but actually do them.
  - For example, you can engage all of the other staff in your organization to practice these role plays with you. This can be beneficial as it creates broader organizational buy-in to your prevention program, and you can gain experience with a variety of responses to the role plays.
- Make sure facilitators have enough experience in group facilitation and child sexual abuse so they can be flexible and ready to meet the needs of the group.

## Impact on Participants and Programs

Although not all participants made comments, of those who did they were unanimously positive. The most common areas people wrote about were the importance of the material and the supportive environment.

"This group was great. I felt this information was very valuable and I enjoyed all of it. Thank you!"

"All the information and support were great. I have no children, but everything I learned will help me with the children around where I live."

"Thank you for your time and listening to my ideas and concerns. I feel like I learned to keep my children safe and what boundaries are and why they are important. I also learned that it is important to talk and model to children to be safe. Thank you again for your time."

Although participant satisfaction speaks to process rather than outcomes, it is an important indicator of the perceived value of the program. The extremely high satisfaction expressed in this pilot indicates that these workshops will likely continue to be seen as valuable resources.

All of the pilot programs reported that implementing this curriculum was valuable and they plan to continue this work going forward. Unlike other efforts in communities that address child sexual abuse through awareness or intervention, this primary prevention curriculum felt really innovative. Facilitators felt that the four sessions allowed for the group to develop a sense of community which led to more in-depth conversations.

Another aspect of this project that was new for some programs is the emphasis on working with adults to protect children and prevent sexual abuse. Traditionally programs that address child sexual abuse have focused on teaching children skills to



report abuse and recognize the danger of strangers. By shifting the focus in this curriculum, facilitators felt that they were finally able to move beyond awareness. Teaching adults bystander intervention skills and providing time to practice having tough conversations with their children was an exciting new opportunity.

Additionally, many programs shared that their work with parents has historically always been after child sexual abuse has occurred. This approach allowed the facilitators to engage in a more comprehensive approach to the problem by being able to meet the needs of parents both before and after sexual abuse.

Programs shared that because of their work on this project they are strengthening their overall community relationships, seeing an increase in community members' engagement with other agency services, and having more conversations about the issue of child sexual abuse. This is one of the unanticipated positive outcomes of this project and a great sign of progress toward the goal of making child sexual abuse less tolerated in their communities.

## Project Findings

Full details on the evaluative process and outcomes are available in [the report from Dr. Townsend](#). The statewide analysis included data from the four project sites as well as one additional community sexual assault program that independently implemented the curriculum. Below we share some of the main points from the Executive Summary.

Results of pre/post survey analyses found that:

- Participants expressed very high satisfaction with the workshops, including high levels of feeling respected and supported by the facilitators.
- Even at the start of the workshops, most participants could appropriately identify high, medium and low risk situations. They did become more comfortable with low risk situations, as intended by the curriculum. This indicates greater skill at distinguishing between innocuous and risky situations.
- At the start of the workshop, most participants reported being very likely to intervene in specific behaviors and scenarios where warning signs of boundary crossing or possible predatory behavior were evident.
- However, there were some significant changes in how they would intervene. Specifically, at the end of the workshops participants were more likely to talk

directly with the adult about whom they are concerned and more likely to talk with children about the situation.

- As for how they would decide about when and how to intervene, the survey data indicated that participants thought more about facilitators than inhibitors of intervening, but there was no change over the course of the workshops.
- Overall, even at the start of the workshops parents were relatively high in their confidence for talking with their children about self-esteem, privacy, sex, and personal safety. Because of those very high ratings, there was no significant change in confidence.
- However, when reporting on actual conversations they had with their children during the previous month, workshop participants reported a significant increase in conversations about safety and privacy. This reflects an important behavioral change that meets core workshop goals.
- Facilitators reported receiving informal feedback from participants that indicated the workshops had positive impacts. These included comments about the workshops being “eye opening” and “surprising” and participants being grateful for the opportunity.

It is possible that the pre/post survey format underestimated the actual change that occurred. This would be consistent with the conclusions from prior evaluations of this curriculum. Therefore, it is recommended that either a retrospective pre-test or a measure of perceived change be used in future evaluations in order to better capture the changes that participants may actually be experiencing.

In summary, there is evidence that the workshops were successful in achieving some of the major goals. This is seen most evidently in the high participant satisfaction ratings, significant change in risk assessments that indicated participants became better at distinguishing between innocuous and risky situations, significant increases in the likelihood of intervening in risky situations by talking with the adult in question and/or talking with the children, and significant increases in adults talking with children about safety and privacy.

Therefore, it is the opinion of the evaluator that there is sufficient evidence for the continuation of WCSAP’s implementation of the *Where We Live* curriculum.



## Future Directions

Given the evaluation findings and the feedback from site facilitators, WCSAP is confident in the decision to continue our focus on child sexual abuse prevention with the *Where We Live* curriculum. All of the sites have shared that given their positive experience with the project; they will carry on this work in coming years. Additionally, WCSAP will be funding a second group of 3-5 sites during FY 2015 ([click here for more information](#)), and will continue to provide assistance and support to any programs interested in implementing *Where We Live*. WCSAP also engages in ongoing conversations with the authors of *Where We Live* and other experts in the field to ensure that programs in Washington have the most up-to-date curriculum, tools, and promising practice approaches.

The intentional focus on child sexual abuse primary prevention and the utilization of a promising curriculum has had unforeseen local and state-level benefits. As programs continue to build community relationships and buy-in as a result of their offering the *Where We Live* trainings, WCSAP also seeks to maintain and increase statewide relationships that support a comprehensive response to child sexual abuse. These cross-sector collaborations have already proven to increase the integration of child sexual abuse into broader conversations and initiatives about child abuse and family well-being. They have also expanded our understanding of how advocates can support protective factors and resilience in children and families.

WCSAP is grateful for the energy and commitment that service providers in our state have demonstrated around child sexual abuse prevention. Our continued efforts to learn and work together will benefit the long-term health and well-being of children and communities in Washington.